| FEI Number: 83-1188013<br>Name and Address of Current Registered Agent:  |  |                 | Certificate of Status Desired | : No |
|--|--|-----------------|-------------------------------|------|
| DEBS, HOWARD<br>4238 MAGNOLIA STREET<br>PALM BEACH GARDENS, FL 33418 US  |  |                 |                               |      |
| The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. |  |                 |                               |      |
| SIGNATURE:   |  |                 |                               |      |
|  | Electronic Signature of Registered Agent |                 |                               | Date |
| Officer/Director Detail :  |  |                 |                               |      |
| Title  | D  | Title           | D                             |      |
| Name   | SAMWICK, MARILYN                         | Name            | KLINGER, LYNN                 |      |
| Address  | 4152 LAZY HAMMOCK ROAD                   | Address         | 9744 SAN VITTORE STREET       |      |
| City-State-Zip:  | PALM BEACH GARDENS FL 33410              | City-State-Zip: | LAKE WORTH FL 33467           |      |
| Title  | D  |                 |                               |      |
| Name   | GILMAN, LEN                              |                 |                               |      |
| Address  | 9744 SAN VITTORE STREET                  |                 |                               |      |
| City-State-Zip:  | LAKE WORTH FL 33467                      |                 |                               |      |

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARILYN SAMWICK

Electronic Signature of Signing Officer/Director Detail

Entity Name: NEW VOICES PROJECT, INC.

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

## **Current Principal Place of Business:**

4238 MAGNOLIA STREET PALM BEACH GARDENS, FL 33418

DOCUMENT# N18000003953

## **Current Mailing Address:**

4238 MAGNOLIA STREET PALM BEACH GARDENS. FL 33418

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04/29/2019

Date

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